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APPLICANTS

Raymond Elijah Barnett, Apple Valley, MN;
 Scott Gary Sorenson, Lakeville, MN;

** CONTINUING DATA *****
NONE ALL

** FOREIGN APPLICATIONS *****
NONE ALL

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance <i>[Signature]</i> Examiner's Signature Initials	STATE OR COUNTRY MN	SHEETS DRAWING 10	TOTAL CLAIMS 19	INDEPENDENT CLAIMS 3
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ADDRESS
 23494
 TEXAS INSTRUMENTS INCORPORATED
 P O BOX 655474, M/S 3999
 DALLAS , TX
 75265

TITLE
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FILING FEE RECEIVED 770	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue)
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